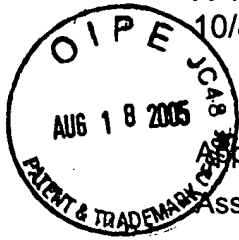


X-1485 US  
10/806,697

PATENT  
Conf. No.: 2365

DPW



IN THE UNITED STATES PATENT OFFICE

Applicants: Martin L. Voogel et al.  
Assignee: Xilinx, Inc.  
Title: "Data Monitoring for Single Event Upset in a Programmable Logic Device"  
Serial No.: 10/806,697 Filed: 03-22-04  
Examiner: Vibol Tan Art Unit: 2819  
Docket No.: X-1485 US Conf. No.: 2365

Mail Stop AMENDMENT  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450


RESPONSE TO RESTRICTION REQUIREMENT

Dear Sir:

In response to the Restriction Requirement mailed from the Patent Office on July 15, 2005, Applicants elect with traverse to prosecute Group I: Claims 1-14. Applicants hereby cancel Claims 15-26 (Groups II and III) but reserves the right to prosecute Group II (Claims 15-20 and 24-26) and Group III (Claims 21-23) in subsequent divisional applications. Applicants wish to bring to the attention of the Examiner that there were 27 claims filed with the above-referenced patent application and Claim 27 has not been addressed in this election/restriction.


A listing of the claims in the present application is appended hereto.

Respectfully submitted,

  
Kim Kanzaki  
Attorney for Applicants  
Reg. No. 37,652

*I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on August 15, 2005.*

Pat Slaback  
Name

  
Signature



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Modified 02-03

PTO/SB/21 (01-03)  
Approved for use through 9/30/00. OMB 0651-0031  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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|  | Filing Date             | March 22, 2004    |
|  | First Named Inventor    | Martin L. Voogel  |
|  | Examiner Name           | Vibol Tan         |
|  | Art Unit                | 2819              |
|  | Patent No.              |                   |
| Attorney Docket Number   |                         | X-1485 US         |

| ENCLOSURES (check all that apply)   |  |  |
|---|--|--|
| <input type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Amendment / Reply<br><input type="checkbox"/> Preliminary Amendment<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavit(s)/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Change Status to LARGE ENTITY<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Substitute PTO-1449(s)<br>IDS by Applicant (PTO/SB/08A)<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/<br>Incomplete Application<br><input type="checkbox"/> Response to Missing<br>Parts under 37 CFR<br>1.52 or 1.53 | <input type="checkbox"/> Assignment Papers<br>(with Recordation Cover Sheet)<br><input type="checkbox"/> Declaration / Oath<br><input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition -<br><br><input type="checkbox"/> To Convert a<br>Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br>Change of Correspondence<br>Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund | <input type="checkbox"/> After Allowance Communication<br>to<br><input type="checkbox"/> Appeal Communication to Board<br>of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group<br>(Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Return Receipt Postcard<br><input type="checkbox"/> Other Enclosure(s)<br>(please identify below):<br><div style="border: 1px solid black; height: 40px; width: 100%;"></div> |
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|--|-----------------------------------|---|
| Firm or<br>Customer Number                 | <b>24309</b><br>(Customer Number) | Reg. Number 37,652  |
| Attn:                                      | <b>Kim Kanzaki</b>                |   |
| Signature                                  |                                   |   |
| Date                                       | <b>August 15, 2005</b>            | Charge any additional fees required/credit any overpayment<br>to our Deposit Account Number: <b>24-0040</b> |

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| Typed or Printed Name  | <b>Pat Slaback</b> |      |                        |
| Signature  |                    | Date | <b>August 15, 2005</b> |

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